Who is My Neighbor?  
Immigration in the US and Health Care  
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At the end of this session, participants should be able to

1. Describe the social, political, and economic realities concerning undocumented immigrants in the United States.
2. Identify ethical challenges posed by social policy in treating undocumented patients in accordance with their dignity.
3. Analyze the challenges and opportunities for the U.S. physician workforces created by the Deferred Action for Childhood Arrivals (DACA) program.

The Context

1. *Most Americans know virtually nothing about Immigration* because it is a “snoozer” of an issue – Complicated, not of immediate relevance to one’s daily life, assumptions that there are (a) no good answers, (b) immigrants are a strain/drain on the country and we must put citizens first.

2. Approximately 11 million “undocumented” persons live in the U.S. Two-thirds > than 10 years.

3. Undocumented = ineligible for all “benefits,” e.g., insurance on ACA exchanges, Medicare, Medicaid (some SCHIP exceptions such as IL All Kids), Social Security, federal student loans, in-state tuition, etc.
Realities
1. Undocumented population is now < 2007: ethnic composition is changing (Asian immigration); Policy limitations
2. US laws have gotten increasingly restrictive creating little chance for most of undocumented population to adjust status
3. “… both illegal immigrants and legal immigrants have incarceration rates far below those of native-born Americans” (Cato Institute 2017)
4. Potential contributions stifled by exclusionary policies, e.g., young people buying insurance on exchanges, diversifying healthcare workforce (Kuczewski 2017)

The Catholic Tradition
Outcasts in a world of globalized indifference
• “Thou shalt not bear false witness against they neighbor.”
• “I came not to call the righteous but the sinners” (Luke 5:32)
• “Has any one of us wept because of this situation and others like it?” . . . the globalization of indifference has taken from us the ability to weep! . . Forgive us, Lord!” (Pope Francis, 7/8/13)

The Catholic Tradition
Undocumented Migrants
(World Migration Day 1996)
St. John Paul II
The problem is divorcing law from lived realities
“...The phenomenon of migration with its complex problems challenges the international community and individual States today more than ever. The latter generally tend to intervene by tightening migration laws and reinforcing border control systems. Thus migration loses that dimension of economic, social and cultural development which it had in the past.”
US Immigration System

- Family-Based Immigration – preference for spouses of US citizens, unmarried minor children, parents of US citizens (over 21); About 225,000 such visas per year
- Employment-based immigration
- 7% limit per country on permanent immigrants (China, India, Mexico, Philippines hit limit every year), e.g., wait from India is in excess of a decade.
- Refugees and Asylees

The Catholic Tradition

Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA)

a. “... removed judicial discretion for individual cases

b. “... bars immigrants who reside in the country in an undocumented status for more than one year from returning to the United States for ten years.

The Catholic Tradition
St. John Paul II

Ecclesia in America 1999

65. In its history, America has experienced many immigrations, as waves of men and women came to its various regions in the hope of a better future. . . .

With this in mind, the Synod Fathers recalled that “the Church in America must be a vigilant advocate, defending against any unjust restriction the natural right of individual persons to move freely within their own nation and from one nation to another. Attention must be called to the rights of migrants and their families and to respect for their human dignity, even in cases of non-legal immigration”. (236)
Justice for immigrants is a first-tier issue for Christians
“We often hear it said that with respect to relativism and the flaws of our present world, the situation of immigrants, for example, is a lesser issue. Some Catholics consider it a secondary issue compared to the “grave” bioethical questions. That a politician looking for votes might say such a thing is understandable, but not a Christian, for whom the only proper attitude is to stand in the shoes of those brothers and sisters of ours who risk their lives to offer a future to their children.”
Gaudete et Exsultate (#102)
Pope Francis

Here’s what we are supposed to believe about immigration as Catholics.
America, September 29, 2017

Catholic Philosophical Anthropology: Humans are
• (pro-, co-) creators (makers)
• Familial animals
• Rooted in connectedness; reluctant migrants
• A natural right to migrate

Policies
• Periodic adjustment
• Family reunification
• Perpetual Dream Act
• Decoupling health, education, public safety from immigration status - Sanctuary

Undocumented Immigrant Patients
First Generation Ethics Consultations
Chronic or Long-term care needs, e.g.,
• Severe injury
• Dialysis
• Organ transplantation

The Issue: “How do we discharge this patient?”
What Clinical Ethicists Do with First Generation Issues

- Organizational obligations?
- Administrators start with “No,” a.k.a., “We can’t do everything”
- CECs surface implicit ethics (Toulmin, Walzer)
- Values: Care, Efficiency, Public Health, Community/Solidarity
- “Because we can’t do everything, doesn’t mean we can’t something.”

Undocumented Immigrant Patients
Second Generation Ethics Consultations

- Post – 2016 election
- Patients not seeking care based on fear:
  Fear of public spaces
  Fear that health-care = government

Issue: How do we get our patients to come in?

What Ethics Consultants Do with Second Generation Issues

- Organizational obligations?
- Values: Care, Efficiency, Public Health
- “Front Door Policy”
- Problem of prepping for unusual event
- Signage
- Develop clinical interventions
Treating Fear or Sanctuary Doctoring
Supporting Undocumented Patients

LUC.edu/sanctuarydoctor
Johana Mejias-Beck, Mark Kuczewski, Amy Blair
Loyola University Chicago Stritch School of Medicine

Deferred Action for Childhood Arrivals
DACA

- Announced by President Obama on 6/15/2012
- Presidential memorandum; an act of prosecutorial discretion
- Provides two-year, renewable stay of action for those who meet criteria in never-passed DREAM Act: Brought to US prior to age of 16, lived in US continuously for > 5 years, no serious criminal offenses, attained at least a high school diploma or equivalent . . .
- Grants an Employment Authorization Document (EAD) and eligibility for a Social Security number
- Approximately 800,000 current DACA recipients in US
- Announcement of unwinding program (9/5/17)

Effects of DACA on Social Determinants of Health

- Increased wages
- Expanded the kinds of employment available
- Fostered access to higher education as institutions increased scholarship and financial aid opportunities.
- DACA recipients now enrolled in college at a rate close to that of their peers in the general population.
- Social integration – our students, staff, colleagues

- DACA temporarily open for renewals (only) based on circuit court decisions
The Really New Jim Crow

- Immigration - the human rights/civil rights issue of our time?
- Dreamers - denied basic civil rights; segregated from opportunity
- In Jim Crow era, duty to create parallel opportunities
- Daunting task – work with state, local government, communities
- Safety, family supports
References

- Mark Kuczewski. Here’s what we are supposed to believe about immigration as Catholics. America, Sep. 27, 2017.
- Elise Foley. This Medical School’s Effort to Health Dreamers Could Benefit Entire Communities. *Huffington Post* 7/24/16.